| Form PTO 1449 | U.S. DEPARTMENT OF COMMERCE | | | ATTY DOCKET NO. | | SERIAL NO. | | | |
|--|-----------------------------|--------------------|---------------|--|-------------|---|------|--|--|
| (Modified) | | PATENT AND TRA | DEMARK OFFICE | 286321US0PCT | 10/568,582 | | | | |
| | | | | APPLICANT | | | | | |
| LIST OF | REFE | RENCES CITED BY AF | PPLICANT | Takashi KIKUKAWA, et al. | | | | | |
| | | | | FILING DATE | | GROUP | | | |
| | | | | February 17, 2006 | | 2884 | | | |
| | | | | U.S. PATENT DOCUMENTS | | | | | |
| EXAMINER | | DOCUMENT | DATE | NAME | CLASS | SUB | | LING DATE | |
| INITIAL | | NUMBER | DATE | NAME | CLASS | CLASS | IF A | PPROPRIATE | |
| | AA | | | | | | | | |
| | AB | | | | | | | | |
| | AC | | | | | | | | |
| | AD | | | | | | | | |
| | AE | | | | | | | | |
| | AF | | | | | | | | |
| | AG | | | | | | | | |
| | AH | | | | | | | | |
| | Al | | | | | | | | |
| | AJ | | | | - | | | | |
| | AK | | | | | | | ······································ | |
| | AL | | | | 1 | | | | |
| | AM | | 1 | | | | | | |
| | AN | | - | | + | | | | |
| | | <u> </u> | | DEICH DATENT DOCUMENTS | | l | | | |
| | | | FU | REIGN PATENT DOCUMENTS | | · | | | |
| | | DOCUMENT NUMBER | DATE | COUNTRY | | TRANSLATION YES NO | | | |
| | AO | CN 1672202 A | 9-21-2005 | China (with English Abstract) | | | | X | |
| | AP | | | | | | | | |
| | AQ | | | | | | | | |
| | AR | | | | | | | | |
| | AS | | | | | | | | |
| | AT | | | | | | | | |
| | AU | | | | | | Ī | | |
| | AV | | | | | | | | |
| | | OTHER R | EFERENCES (| Including Author, Title, Date, Pertine | nt Pages. e | tc.) | | | |
| | | I | | | | | | | |
| | AW | | | | | | | | |
| | AX | | | | | | | | |
| | AY | | | | | | | | |
| | AZ | | | | Add | Additional References sheet(s) attached | | | |
| Examiner | | | | | Date Co | Date Considered | | | |
| *Examiner: Initial if reference is considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. | | | | | | | | | |